

EAST COVENTRY TOWNSHIP
Application for Mechanical Permit

Permit No. _____

Fee _____

Job Location:	Address: _____ City State Zip _____		
Property Owner:	Name: _____ City State Zip _____ Phone: (____) _____ Fax: (____) _____ E-mail: _____		
Mechanical Contractor:	Name: _____ City State Zip _____ Phone: (____) _____ Fax: (____) _____ Cell: (____) _____		
Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional <input type="checkbox"/> New Work <input type="checkbox"/> Alteration <input type="checkbox"/> Other <input type="checkbox"/> _____		Proposed Install Date: _____	
Description of Work _____ _____ _____			
HEATING			
Type of Fuel _____		Cost of Installation _____	
Name of Unit _____		Mfg. By _____	
Capacity of Unit (BTUs) Input _____		Output _____	
AIR CONDITIONING			
Capacity of Unit (BTU's) Input _____		Cost of Installation _____	
Distance from property line _____			
Name of Unit _____		Mfg. By _____	
All work, materials and construction to be in accordance with the rules and regulations of the Mechanical Codes of the Township of East Coventry. Mechanical inspections require 24 hours notice minimum. Rough inspections required. Final inspections required for ALL permits. PERMITS ARE NOT TRANSFERRABLE			
Signature of Applicant _____ PA State License No. _____			

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent. I hereby attest to the information on this application to be accurate and true to the best of my ability. I agree to conform to all applicable laws of East Coventry Township and certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable of such permit.

Signature

Date